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TECHNICAL CONSULTANT & PATENT AGENT



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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re the Utility Patent Application: Mr. Brian PUCKETT Our Docket no. 191.01.02-P-USA

Application Number: 10/652,818

Art Unit 2875

Filed: August 29, 2003

In Re: Office Action from Examiner Laura Tso dated October 01, 2004

*Transmitted by Rightfax to (703) 872-9306*

**REPLY AND AMENDMENT**

Commissioner for Patents

Washington, D.C. 20231

Dear Sir:

In compliance with the office action of October 01, 2004, please amend the above-identified application as indicated in Section 1 below, and consider the reply and arguments in Sections 2 and 3 below. A Remarks section is included at the end of this communication. Furthermore, a substitute specification is included as an attachment to this communication.

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02/02/2005 EKOL11 00000001 10652818

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/652,818	
	Filing Date	08/29/2003	
	First Named Inventor	PUCKETT, Brian	
	Art Unit	Flashlight System	
	Examiner Name	TSO, Laura K.	
Total Number of Pages in This Submission	30	Attorney Docket Number	191.01.02-P-USA

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to a Technology Center (TC)
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<b>Remarks</b> Amendment & Reply - 14 pages, incl. Appendix Substitute specification - 12 pages This form, Form SB/17, form PTO-2038, & form PTOL-413A - 4 pages	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual	Michael A. Shippey
Signature	<i>Michael A. Shippey</i>
Date	01/31/2005

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 01/31/2005			
Typed or printed	Michael A. Shippey		
Signature	<i>Michael A. Shippey</i>	Date	01/31/2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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Missing 11 pages

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# FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$) 60

**Complete If Known**

Application Number	10/852,818
Filing Date	08/29/2003
First Named Inventor	PUCKETT, Brian
Examiner Name	TSO, Laura K.
Art Unit	2875
Attorney Docket No.	191.01.02-P-USA

**METHOD OF PAYMENT (check all that apply)**

☐ Check ☒ Credit card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account:

Deposit Account Number:   
Deposit Account Name:   
The Director is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Credit any overpayments

☐ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

**FEE CALCULATION**

**1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 790	2001 395	Utility filing fee	
1002 350	2002 175	Design filing fee	
1003 550	2003 275	Plant filing fee	
1004 790	2004 395	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
<b>SUBTOTAL (1)</b>			(\$)

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims  -20\*\* =  X  =

Independent Claims  -3\*\* =  X  =

Multiple Dependent  =

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1202 18	2202 9	Claims in excess of 20	
1201 68	2201 44	Independent claims in excess of 3	
1203 300	2203 150	Multiple dependent claim, if not paid	
1204 68	2204 44	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	
<b>SUBTOTAL (2)</b>			(\$)

**3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	2053 65	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 430	2252 215	Extension for reply within second month	
1253 980	2253 490	Extension for reply within third month	
1254 1,530	2254 765	Extension for reply within fourth month	
1255 2,080	2255 1,040	Extension for reply within fifth month	
1401 340	2401 170	Notice of Appeal	
1402 340	2402 170	Filing a brief in support of an appeal	
1403 300	2403 150	Request for oral hearing	
1451 1,510	2451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,370	2453 685	Petition to revive - unintentional	
1501 1,370	2501 685	Utility issue fee (or reissue)	
1502 490	2502 245	Design issue fee	
1503 680	2503 330	Plant issue fee	
1460 130	2460 130	Petitions to the Commissioner	
1807 50	2807 50	Processing fee under 37 CFR 1.17(q)	
1808 180	2808 180	Submission of Information Disclosure Stmt	
8021 40	28021 40	Recording each patent assignment per property (times number of properties)	
1809 790	2809 395	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 790	2810 395	For each additional invention to be examined (37 CFR 1.129(b))	
1801 790	2801 395	Request for Continued Examination (RCE)	
1802 900	2802 900	Request for expedited examination of a design application	
Other fee (specify) _____			
<b>SUBTOTAL (3)</b>			(\$)

**SUBTOTAL (1) + SUBTOTAL (2) + SUBTOTAL (3) = (\$)** 60

**SUBMITTED BY**

Name (Print/Type)	Michael A. Shippey	Registration No. (Attorney/Agent)	45,588	Telephone	714-693-9110
Signature	<i>Michael A. Shippey</i>	Date	01/31/2005		

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

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PTOL-413A (05-03)  
Approved for use through xx/xx/xxxx. OMB 0551-0031  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

### Applicant Initiated Interview Request Form

Application No.: 10 / 652,818 First Named Applicant: PUCKETT, Brian  
Examiner: TSO, Laura K. Art Unit: 2875 Status of Application: non-final OA

#### Tentative Participants:

(1) Examiner TSO (2) Michael Shippey, agent for Applicant  
(3) \_\_\_\_\_ (4) \_\_\_\_\_

Proposed Date of Interview: 02/28/2005 Proposed Time: 1 PM EST (AM/PM)

#### Type of Interview Requested:

(1) ☒ Telephonic (2) ☐ Personal (3) ☐ Video Conference

Exhibit To Be Shown or Demonstrated: ☐ YES ☒ NO

If yes, provide brief description: \_\_\_\_\_

### Issues To Be Discussed

Issues (Rej., Obj., etc)	Claims/ Fig. #s	Prior Art	Discussed	Agreed	Not Agreed
(1) <u>rejection</u>	<u>1,3-5,7-9,13</u>	<u>US 5,642,234</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) <u>rejection</u>	<u>1,3,4,8,11-13</u>	<u>US</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Continuation Sheet Attached

#### Brief Description of Arguments to be Presented:

Applicant will present arguments to advocate distinctness of current invention from prior art and novelty of combination presented in current invention.

An interview was conducted on the above-identified application on \_\_\_\_\_.

#### NOTE:

This form should be completed by applicant and submitted to the examiner in advance of the interview (see MPEP § 713.01).

This application will not be delayed from issue because of applicant's failure to submit a written record of this interview. Therefore, applicant is advised to file a statement of the substance of this interview (37 CFR 1.133(b)) as soon as possible.

Michael A. Shippey  
(Applicant/Applicant's Representative Signature)

\_\_\_\_\_  
(Examiner/SPE Signature)

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